



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

Whatever her qualifications, a nurse who is looking for money would be unwise to choose hospital social service, as the salaries for such work are usually lower than those paid for hospital administration or for private nursing, and it is no field for any one seeking a "soft snap." The inexperienced may be tempted by short hours; usually from 9 a.m. to 5 p. m., with Saturday afternoons, Sundays, and holidays off duty, but after one has walked from nine to five, from ward to ward, to probation court, railroad station, employment agency, up tenement stairs, and where not, her body aches with weariness, and her mind and heart cannot dismiss the perplexities of the day when the whistle blows.

Social service means hard work, difficult problems, daily discouragement, but, at the same time, it offers an endless variety of human interest. Often one is thrilled by unsuspected nobility in one's patients or in one's fellow workers. Now and then comes a chance to be of real, decisive help to some other life. One such opportunity makes it all worth while.

INSPECTION OF TRAINING SCHOOLS IN NEW YORK STATE¹

By AMY M. HILLIARD, R.N.

The statistics for the past year show a most gratifying increase in the number of candidates seeking entrance to the registered nurse training schools in this state. The educational credentials that have been submitted bear evidence that more women of sound education are entering the schools for nursing education. A large number are still being admitted under the equivalent but many of these equivalents stand for secondary education which is considerably in advance of one year's secondary work. Unfortunately when diplomas or detailed statements are not submitted, definite credit cannot be given.

Thirty-seven cards were issued for partial or complete college courses. 621 cards (over one-quarter of the entire number) were issued for graduation from high school or its equivalent. 1022 cards were issued for one or more years of high school. 582 cards were issued for equivalents. 288 applications were not approved. 128 were too incomplete to receive ratings.

It is very encouraging to note the number of nurse student certificates which are being issued to candidates for entrance to nursing schools.

¹ Report of the Inspector of Nurse Schools read at the recent convention of the New York State Nurses' Association.

A substantial number of our schools require the nurse student qualifying certificate before admission of candidate to preliminary course. Other schools refuse to admit students until the receipt of a card of approval from the department. On inspection this past summer, I found in one school between 30 and 40 cards of approval for candidates that were not due to enter until two months later.

There are registered under the Regents of the University of the State of New York, 328 schools of nursing. 135 of these schools are located in New York State.

During the past year the following eight nurse training schools located in New York State have been registered: Broad Street Hospital, Oneida, formerly accredited; Ithaca City Hospital, Misericordia Hospital, New York City; Mt. St. Mary's Hospital, Niagara Falls; Ossining Hospital; St. Joseph's Hospital, Yonkers; St. Joseph's Hospital, Far Rockaway; United Hospital, Port Chester.

The registration of one has been rescinded. The applications of 4 were rejected as failing to meet the minimum requirements. Four schools are accredited.

Six out-of-state schools have been registered in New York State: All Souls Hospital, Morristown, N. J.; Cambridge Hospital, Cambridge, Mass.; Lutheran Hospital, Cleveland, O.; Mary Fletcher Hospital, Burlington, Vt.; New England Baptist Hospital, Boston, Mass.; Oak Park Hospital, Oak Park, Ill.

Three inspections have been made in each of four schools; two in each of 12 schools and one in each of 124 schools; in all, 160 inspections. Of these, 147 inspections were made in schools already registered and 13 in schools seeking registration.

1429 diplomas have been issued to graduates of registered nursing schools in the state, an increase of 118 over last year.

In training there are 1856 first year pupils; 1654 second year pupils; 1110 third year pupils; totaling 4620 pupils, an increase of 292 over last year.

Over 2800 credentials have been acted on, an increase of more than 600 over the year preceding. 2434 cards of approval have been issued.

86 schools give three-year courses; 36 schools give from two to three-year courses; 13 schools give two-year courses; 5 schools allow four weeks' vacation yearly; 49 schools allow three weeks' vacation yearly; 76 schools only two weeks' vacation yearly. The number of paid instructors is increasing as well as the number of paid lecturers. A few schools are giving definite attention to recreation for students.

Both of my predecessors have given much time, thought and effort to secure the adoption of an adequate and uniform system of student records in our schools. Bulky record books are hard to duplicate and

Inspection of Training Schools in New York State 213

to file conveniently. The result is that these books are likely to be transferred to an attic or basement and lost sight of. In one of the large schools in this state a very good record book has entirely disappeared and a graduate nurse seeking a supplementary course in college has been unable to get any record of her professional work in that school. The inspector not infrequently finds that with the advent of a new principal, the card system which had been installed at the request of the Department, is often modified or even completely discontinued. The *Syllabus for the Guidance of Registered Nurse Training Schools* contains an outline of an excellent system for student records. This was published in 1911, has not been revised, and I have seen no system which I thought was an improvement on it. Notwithstanding these facts, the student records in the average nurse training school in this state are very defective. The alumnae associations could lend material assistance in demanding that graduates of their schools shall be able to obtain credit for practical and theoretical instruction received. They can direct the attention of the training school committees to the fact that the Department of Nursing and Health, Teachers College, the American Red Cross and other organizations have had much difficulty and in some instances have been totally unable to get any records concerning the professional training of graduates of their schools.

In the same *Syllabus* there is published an outline for instruction in dietetics, consisting of 30 periods during the preliminary course and 20 periods during the intermediate course. There is still a belief prevalent that the Department considers 12 periods sufficient to meet the requirements for satisfactory instruction in this, one of the most important courses of nursing instruction. 81 schools of nursing in this state have no resident instructors in dietetics. This means that these schools are unable to give practical diet-kitchen training under competent supervision. No appropriation whatever is made for the appointment of graduate dietitians in the New York State hospitals for the insane.² Many of the smaller schools in the state provide much better instruction and supervision in this subject than is given in the larger schools. In two of these schools the dietitian, who is also a graduate nurse, acts as an assistant to the superintendent of the hospital, an arrangement that has been most satisfactory. It is difficult to conjecture what work a graduate nurse could satisfactorily undertake without a thorough knowledge of this subject, whether it be in the administration of hospitals, supervising work of the pupils, caring for private patients or in any of the avenues of public health nursing.

² Since compiling these statistics we have been notified of the appointment of a resident graduate dietitian at the St. Lawrence State Hospital, Ogdensburg, N. Y.

Very little has been done to shorten the hours on duty for the student nurse. The sentiment is strong against this abuse of service even among the faculty of schools where longest hours obtain. The reason most often given is that the nurses' residence is too small to admit enough pupils to effect a change. That every new wing on a hospital necessitates a corresponding new wing on the nurses' residence, should be fairly evident to hospital committees, but unfortunately it is the occasional rather than the average hospital that makes an adequate increase in the capacity of the nurses' residence to meet the needs of an increase in the capacity of the hospital. Long hours on duty for pupils, followed by evening class and lecture periods must be the result. Evening class work has been very generally discontinued and it would seem that 11 hours on day duty or 12 hours on night duty out of every 24 hours would be quite long enough without adding class and lecture periods. Most of the evening class work is given in the very schools which exact the longest hours on duty for practical work.

For some reason, difficult to fathom, the services of pediatrics and obstetrics are often combined. Indeed one hospital has erected a separate building for these services so that it is impossible to separate them. Another hospital has set aside a floor in the private patients' pavilion for this purpose. Although an effort is generally made to separate the nursing in these two departments during day hours, a single nurse is expected to care for both services at night.

This brief presentation shows the wonderful opportunity for development along many lines and it must be observed that one person could not accomplish the constructive work for which the highly centralized system in the New York State Department of Education would give the opportunity.

When we realize that we are working under a permissive and not a mandatory law and that this truly notable progress has been made possible by a steady and concerted effort on the part of the superintendents of nurse training schools, at no matter what cost, to raise their standards, we should all feel greatly encouraged.

The Department of Nursing in the Education Department at Albany should include, in addition to the inspector, a secretary who shall be a graduate nurse of wide experience and who will be able to give her entire time to the work of the office. The correspondence of this department should not be interrupted for days and sometimes weeks at a time as has been necessary during the frequent absences of the inspector from Albany. Inquiries from the nursing schools and the general public should be given prompt attention.